

STATES AND TUBERCULOSIS.

Legislation dealing with tuberculosis has been enacted in forty-eight States and Territories of the United States, according to a bulletin soon to be published by the National Association for the Study and Prevention of Tuberculosis. Only in Arizona, Idaho, Nevada, Wyoming, and Alaska, has the subject received no legislative consideration.

State tuberculosis sanatoria to the number of forty-two have been established in thirty-three different States. Special laws providing for the establishment of local hospitals by municipalities or counties have been passed in fourteen States. In thirty-four States, laws are in force providing for the reporting and registration of living cases of tuberculosis. In four States, New York, New Jersey, Wisconsin, and Minnesota, special laws give State and local health authorities power to remove and detain tuberculous persons who menace the health of their families or associates.

Six States, Illinois, Iowa, Missouri, Minnesota, New York, and Texas, have laws which give the people the privilege of voting at general or special elections on the establishment of county or municipal tuberculous hospitals. Massachusetts, Minnesota, New Jersey, Wisconsin, and Washington grant subsidies ranging from \$3 to \$5 a week to local hospitals. Laws prohibiting spitting in public places have been enacted in more than twenty States.

Commenting on the problem of State legislation as it affects the prevention of tuberculosis, the National Association says:

"A law providing for the reporting and registration of every living case of tuberculosis is fundamental to any thoroughgoing campaign against this disease. Without a knowledge of the location of every case of tuberculosis, the disease cannot be controlled. Of equal importance also is legislation which will give cities, towns, and counties the authority to establish and maintain local hospitals for tuberculous cases. The control of tuberculosis is a local problem. Everything possible should be done to provide institutions easy of access, especially for advanced cases."

CHAIRMAN OF COMMISSION APPOINTED.**ONTARIO WORKMEN'S COMPENSATION ACT.**

At a Cabinet Council in Toronto this week, Mr. Samuel Price, K.C., St. Thomas, Ont., was appointed chairman of the new Workmen's Compensation Act Commission.

Two other commissioners will be appointed in due course. In the meantime preliminary steps will be taken by Mr. Price to bring the Act into working operation, assisted by Mr. Hinsdale from the State of Washington, who is employed by the government.

The appointment carries a salary of \$10,000.

Mr. Price, who is fifty-one years of age, received his education at the public schools and at Strathroy and St. Thomas Collegiates and thereafter at Trinity University, Toronto. He graduated B.C.L., with gold medal, and was afterwards called to the Bar. In St. Thomas he formed a legal partnership with the Hon. Mr. Crothers, Minister of Labor, under the name of Crothers & Price. He has served on Royal Commissions both in a Dominion and Provincial connection.

HABITS AS TO ALCOHOL.

We publish the following extract from paper read before the Actuarial Society of America, by Dr. Oscar H. Rogers and Arthur Hunter.

A study of the classes of those insured who had used intoxicating beverages to excess in the past shows clearly the detrimental effect of alcohol on longevity. Even where the applicant had been a total abstainer for more than five years after taking a cure the additional mortality was 27 per cent. It is evident that very few men who have used alcohol to excess in the past, or who use it occasionally to excess at the present time, may be accepted by the companies at the regular rate of premium. There is no class which calls for more care on the part of the medical director, and none in which there is a greater difference of opinion. This arises partly from the difficulty of getting accurate information regarding the applicant's habits, partly from the varying degrees of tolerance of the drug among individuals, and partly from the different opinions held by experts regarding the effect of alcohol on longevity.

When we turn to the class of steady users of alcohol, the difficulty becomes greater, because so many men underestimate their daily consumption. Men naturally deceive themselves into the belief that they do not average nearly as much as they really drink. On the other hand, there were included in the group designated as "conservative interpretation" many persons who cannot fairly be looked upon as steady, free users of alcohol. For example, several of the companies included in this group men who take two glasses of beer a day or one glass of whisky. The two groups of this class may be said to consist of those who are steady, but very moderate users (conservative interpretation), and steady, free, but not immoderate users (liberal interpretation). The results obtained in both these groups must be interpreted in a broad spirit, due allowance being made for both exaggerations and suppressions of fact—principally the latter.

There is no doubt that abstinence in the use of alcohol makes for longevity, and that nothing seems to be more clearly proven than that a free use of alcohol greatly increases the mortality. The mortality among insured who take even two glasses of whisky per day at date of application is probably that among total abstainers.

LIFE INSURANCE.

"To bear each other's burden"—In a word,
That is my message! Those who live shall pay
For those whom Death, untimely, bears away.
Kind reader, whose warm heart is always stirred
By aught that may assist your fellow men,
Give to my work your gracious benison.
When the physician and the preacher fail,
I work my miracles, and bring to those
Left helpless to the fury of the gale
Means to defy the sternest wind that blows.
Through me the husband and the father knows,
When in the Shadow of Death's dreadful Vale
He makes his pilgrimage, men shall not see
His wife and children left to poverty.

—J. L. Kenway.